



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

	Application Number	10/613,911	
	Filing Date	July 5, 2003	
	First Named Inventor	Alexander Medvinsky	
	Group Art Unit	2136	
	Examiner Name	Hoffman, Brandon S.	
Total Number of Pages in this Submission		Attorney Docket Number	D03041

ENCLOSURES

(check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> Prior to Additional Examination <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group {Appeal Notice, Brief, Reply Brief} <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below) <ul style="list-style-type: none"> <input type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> Associate Power of Attorney <input checked="" type="checkbox"/> RCE <input type="checkbox"/> Copy of Notice to File Missing Parts <hr/> <hr/>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Benjamin D. Driscoll	Registration No.	41,571
Signature			
Date	September 26, 2005		

CERTIFICATE OF TRANSMITTAL/MAILING

I hereby certify that this correspondence is being facsimile transmitted to facsimile number _____ or deposited with the United States Postal Service with sufficient postage thereon, as first-class mail, in an envelope addressed to:
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Typed or printed name	Carol J. Smith
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	Date
	September 26, 2005

